

Information Bulletin for **Primary Care Network Providers**



October 2005

TABLE OF CONTENTS	PCN BULLETINS BY TYPE OF SERVICE
05 - 98 Vision Codes Opened 2	Optometrists/Ophthalmologists 05 - 98
05 - 99 New Cumulative Limits; Pharmacy 2	Physician Sarvings 05 00 107
05 - 100 Palladone - Withdrawn From Market 3	Physician Services 05 - 99-107
05 - 101 Vesicare & Sanctura on PA 3	Hospitals
05 - 102 Ventavis - PA Policy	Pharmacists 05 - 99-104
05 - 103 Schedule II Analgesics	Phaimacists
05 - 104 Zelnorm - Change in PA Criteria 3	Radiologists 05 - 106
05 - 105 Diagnosis Codes Opened 4	
05 - 106 Digital Mammography 4	
05 - 107 Preventive Health Codes Opened 4	

Notice: Current PCN Manual On-Line

The current Utah Primary Care Network Provider Manual is available on-line. There is a link to the PCN Manual bottom of the Provider's web page. Providers can obtain a copy of an updated page, or the entire PCN Manual, on the web site or by contacting Medicaid Information. The revision date of each page is at the top of the page. A change is typically marked in the left margin of the page with a vertical line.

> This bulletin is available in editions for people with disabilities. **Call Medicaid Information:** 538-6155 or toll free 1-800-662-9651

PCN web site: http://health.utah.gov/pcn **PCN** Information

- Salt Lake City area, call 538-6155.
- In Utah, Idaho, Wyoming, Colorado, New Mexico, Arizona and Nevada, call toll-free 1-800-662-9651. From other states, call 1-801-538-6155.

Medicaid web site: http://health.utah.gov/medicaid Requesting a publication?

Send a Publication Request Form.
- by FAX: 1-801-536-0476

- by mail to: Division Of Health Care Financing Box 143106, Salt Lake City UT 84114-3106

Page 2 of 4 PCN Bulletin: October 2005

05 - 98 Vision Codes Opened

Codes <u>S0620</u>, Routine Ophthalmologic Exam Including Refraction; New Patient, pays \$39.29, and <u>S0621</u>, Routine Ophthalmologic Exam Including Refraction; Established Patient, pays \$35.50, are now open for opticians and ophthalmologists. This change allows the vision exam and refraction to be billed under a single code.

•

05 - 99 New Cumulative Limits; Pharmacy

The Drug Utilization Board has established cumulative limits for four classes of drugs and one single agent. They are as follows:

- Muscle relaxants carisoprodol, chlorzoxazone, cyclobenzaprine, metaxalone, methocarbamol, orphenadrine, orphenadrine compounds, brand names or generics, have each had a cumulative limit of 30 tablets in 30 days established by the DUR Board. No restrictions will be established for dantrolene, baclofen and tizanadine, which are used primarily for spinal cord injury cases.
- 2. Butalbital, butalbital/APAP and ASA combinations cumulative limit of 30 tablets/capsules in any combination in 30 days. This cumulative limit may be changed in the future.
- 3. Short-Acting Opiate Analgesics a cumulative limit of 180 tabs/caps in any combination in 30 days has been established.
- 4. Erectile dysfunction drugs The Utah Department of Health Administration has determined that a prior authorization limiting the recipient to five doses in any combination per month will be established. Recipients on a convicted sex offenders listing will not be provided medication. New drugs for this use or in this category will be subject to the same limitations.
- 5. Spiriva capsules a cumulative limit of 30 doses in 30 days has been established. Spiriva is used only for Chronic Obstructive Pulmonary Disease.

PCN web site: http://health.utah.gov/pcn
PCN Information

- Salt Lake City area, call 538-6155.
- In Utah, Idaho, Wyoming, Colorado, New Mexico, Arizona and Nevada, call toll-free 1-800-662-9651.

From other states, call 1-801-538-6155.

Medicaid web site: http://health.utah.gov/medicaid
Requesting a publication?

Send a Publication Request Form.

- by FAX: 1-801-536-0476
- by mail to: Division Of Health Care Financing Box 143106, Salt Lake City UT 84114-3106

PCN Bulletin: October 2005 Page 3 of 4

05 - 100 Palladone - Withdrawn From The Market

Palladone (Hydromorphone SA capsules) by Purdue, has been removed from the marketplace by the manufacturer according to an FDA recommendation.

•

05 - 101 Vesicare and Sanctura

At the July DUR Board meeting, the Board placed Vesicare and Sanctura under the prior authorization restrictions currently in place for the anti-cholinergic over-active bladder drugs. Doctors will need to obtain a prior authorization via a written request and documented therapy failures. Specific criteria may be obtained by calling the Prior Authorization desk at 538-6155.

05 - 102 Ventavis - PA Policy

The DUR Board has recommended that Ventavis, a new drug for the treatment of pulmonary arterial hypertension, be placed on prior authorization. Criteria required for approval are:

- 1) Covered for labeled indications only.
- Not for simultaneous use with Flolan, Tracleer, or Remodulin.

•

05 - 103 Schedule II Controlled Substance Analgesic Medications - Brand vs Generic

Prior authorizations for brand name elements of this drug class require physician evaluated, charted documentation of an allergic skin eruption or reaction. "Client said", or "client reports", or "doesn't work", or "causes nausea", or "treatment failure" are not acceptable for authorization from generic to name brand in this category.

•

05 - 104 Zelnorm - Change In Prior Authorization Criteria

Zelnorm prior authorization criteria has been amended. Previous information remains in place with changes. Originally, the prior authorization was for six months. Now, a 30-day holiday which documents failure with other methods will be required before a second authorization will be available. No further allowances will be allowed after one year. For irritable bowel syndrome (IBS), no trials with stimulant laxatives are required.

PCN web site: http://health.utah.gov/pcn
PCN Information

- Salt Lake City area, call 538-6155.
- In Utah, Idaho, Wyoming, Colorado, New Mexico, Arizona and Nevada, call toll-free 1-800-662-9651.

From other states, call 1-801-538-6155.

Medicaid web site: http://health.utah.gov/medicaid
Requesting a publication?

Send a Publication Request Form.

- by FAX: 1-801-536-0476
- by mail to: Division Of Health Care Financing Box 143106, Salt Lake City UT 84114-3106

Page 4 of 4 PCN Bulletin: October 2005

05 - 105 Diagnosis Codes Covered For Emergency Only Client

276.51 276.52 466.19 599.6-69	Dehydration Hypovolemia Acute bronchiolitis due to other infectious organisms Urinary obstruction Asphysia
799.01	Asphyxia

05 - 106 Digital Mammography

Digital mammography add-on code 76082 and code 76083 were placed in the CPT manual, January 2004. The CPT manual instructs the provider to submit the add-on code 76082 or 76083 with the code for standard mammography, and code 76090 or 76091 or 76092 to indicate digital mammography was completed. The add-on codes 76082 and 76083 will be opened in the reference file for coding purposes to pay zero, beginning January 1, 2005. The provider may complete standard or digital mammography. However, PCN will continue to pay the reimbursement rate for standard mammography.

05 - 107 Preventive Health Examinations

Effective July 1, 2005, **one** preventive health examination is covered per calendar year. The following codes have been added to the CPT list:

99385	Initial comprehensive preventive medicine examination, age 18-39 years
99386	Initial comprehensive preventive medicine examination, age 40-64 years
99395	Periodic comprehensive preventive medicine examination, age 18-39 years
99396	Periodic comprehensive preventive medicine examination, age 40-64 years

PCN web site: http://health.utah.gov/pcn
PCN Information

- Salt Lake City area, call 538-6155.
- In Utah, Idaho, Wyoming, Colorado, New Mexico, Arizona and Nevada, call toll-free 1-800-662-9651.

From other states, call 1-801-538-6155.

Medicaid web site: http://health.utah.gov/medicaid
Requesting a publication?

Send a Publication Request Form. - by FAX: 1-801-536-0476

- by mail to: Division Of Health Care Financing Box 143106, Salt Lake City UT 84114-3106